PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mall Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

			or <u>rax</u> (5/					
INSTRUCTIONS: This impropriate. All further condicated unless correcte maintenance fee notificat	form should be used to correspondence including d below or directed obtions.	or transmitting the ISS ing the Patent, advance of nerwise in Block 1, by (hould be completed where correspondence address as trate "FEE ADDRESS" for	
CURRENT CORRESPONDE	NCE ADDRESS (Note: Use Bi	ock I for any change of address)	Note Fee(pape bave	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
2292	7590 12/27	72007		C	Hillonto of	Mailing or Trans	mission	
PO BOX 747	ART KOLASCH H, VA 22040-0747	- *	i be State addr trans	eby certify that the self Postal Service vessed to the Mai mitted to the USP	is Fee(s) 7 with suffici I Stop ISS TO (571)	Fransmittal is being ient postage for firs SUB FEE address 273-2885, on the d	deposited with the United it class mail in an envelope above, or being facsimile ate indicated below.	
							(Depositor's rame)	
							(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORN	EY DOCKET NO.	CONFIRMATION NO.	
10/516,727	12/06/2004		Rainer Noack		5000	0-0106PUS1	9942	
TITLE OF INVENTION:		THE PRODUCTION OF	F 1,2,4-TRIAZOLYMETH	YL-OXIRANES				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEB	TOTAL FEE(S) DUE	· DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	03/27/2008	
EXAMINER ART UNIT			CLASS-SUBCLASS					
CHUNG, SUS	ANNAH LEE	514-383000				·		
Chaage of correspondence address or indication of "Fee Address" (37 CFR 1.50). Change of correspondence address (or Chaage of Correspondence Address form PTOS/S01/22 attached. "Fee Address" indication (or "Fee Address" Indication form PTOS/S01/28 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternation (2) the name of a single registered attorney or a 2 registered patent atto	I. For priming on the patent floort page, list 1) the names of up to 3 negistered patent stormerys r agent 00, alternatively, 2) the name of a largel firm flowing as a member a geitered stormery or agent) and the names of up to A contract in the primited, sent in the name is In the name of up to A contract in the name is A contract in the				
ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	ne)				
PLEASE NOTE: Unio	ess an assignee is ident in 37 CFR 3.11. Com	ified below, no assigner pletion of this form is NO	o data will appear on the p OT a substitute for filing an	atent. If an assign assignment.	nee is iden	nified below, the d	ocument has been filed for	
(A) NAME OF ASSIC			(B) RESIDENCE: (CITY	and STATE OR	COUNTR	Y)		
BASF Aktiengesellschaft Ludwigshafen, Germany Please check the appropriate assignee category or categories (will not be printed on the patent): 🔘 Individual 🚨 Corporation or other private group entity C								
Please check the appropri	ate assignee category of	categories (will not be p	printed on the patent) :	Individual 🔕 C	orporation	or other private gr	oup entity Government	
	o small entity discount of Copies <u>four</u>	b. Psymont of Foc(s): (Please first reapply any previously paid issue fee shown above) \[\Bar\] check is enclosed. \[\Bar\] Psyment by credit card. Form PTO-2008 is attached. \[\Bar\] This control is thereby substrained to charge the rougical face(s), any deficiency, or credit any overpayment, to Depoint Account (Namber() \(\Bar\) = \(\Bar\) 44 \(\Bar\) (enclose an extra copy of this form).						
5. Change in Entity Stat	us (from status indicate SMALL ENTITY stat		D b. Applicant is no len	ger claiming SMA	LL ENTI	TY status. See 37 C	FR 1.27(g)(2).	
NOTE: The Issue Fee and	Publication Fee (if req	ured) will not be accept	ed from anyons other than	he applicant; a reg	istered att	omey or agent; or t	he assignce or other party in	
Authorized Signature						5, 2008		
Typed or printed name	Andrew B	. Meikle		Registration	No 32	2,868		
This collection of inform an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandra, V	ation is required by 37 (iality is governed by 33 application form to the ons for reducing this burginia 22313-1450. De 11.1450	CFR 1.311. The informat 5 U.S.C. 122 and 37 CFF 6 USPTO. Time will var arden, should be sent to t O NOT SEND FEES OR	ion is required to obtain or \(\) 1.14. This collection is es y depending upon the indi- he Chief Information Offic COMPLETED FORMS T	retain a benefit by simated to take 12 vidual case. Any c ar, U.S. Patent and O THIS ADDRES	the public minutes to omments I Tradema S. SEND	which is to file (an o complete, includi on the amount of t rk Office, U.S. Dep TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.